

Attorney or Party Name, Address, Phone & Fax Nos.,
State Bar No. & Email

Benjamin Heston
Bar Number: 297798
Nexus Bankruptcy
3090 Bristol Street #400
Costa Mesa, CA 92626
Phone: (949) 312-1377
Email: ben@nexusbk.com

- ☐ Debtor(s) appearing without an attorney
☒ Attorney for Debtor(s)

FOR COURT USE ONLY

**United States Bankruptcy Court
Central District of California - Riverside Division**

In re:
Cherie Lynn Jasso

Cipriano Ceja Jasso III

CASE NO.:

CHAPTER: 7

**DECLARATION BY DEBTOR(S)
AS TO WHETHER INCOME WAS RECEIVED
FROM AN EMPLOYER WITHIN 60 DAYS OF THE PETITION
DATE**

[11 U.S.C. § 521(a)(1)(B)(iv)]

Debtor(s).

[No hearing required]

Debtor(s) provides the following declaration(s) as to whether income was received from an employer within 60 days of the Debtor(s) filing this bankruptcy case (Petition Date), as required by 11 U.S.C. § 521(a)(1)(B)(iv):

Declaration of Debtor 1

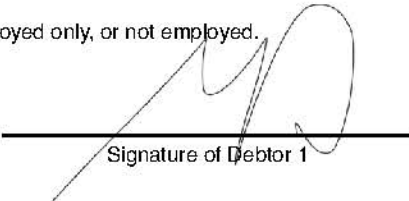
1. ☒ I am Debtor 1 in this case, and I declare under penalty of perjury that the following information is true and correct:

During the 60-day period before the Petition Date (**Check only ONE box below**):

- ☐ I was paid by an employer. Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. (If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.)
- ☒ I was not paid by an employer because I was either self-employed only, or not employed.

Date: 02/19/2025

Cherie Lynn Jasso
Printed name of Debtor 1


Signature of Debtor 1

Declaration of Debtor 2 (Joint Debtor) (if applicable)

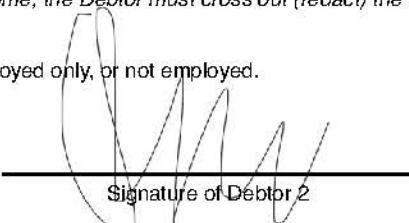
2. ☒ I am Debtor 2 in this case, and I declare under penalty of perjury that the following information is true and correct:

During the 60-day period before the Petition Date (**Check only ONE box below**):

- ☒ I was paid by an employer. Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. (If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.)
- ☐ I was not paid by an employer because I was either self-employed only, or not employed.

Date: 02/19/2025

Cipriano Ceja Jasso III
Printed name of Debtor 2


Signature of Debtor 2

Employee Information

Employee: CIPRIANO C JASSO III
Employee ID: 03566860
Finance Number: 05-5790
Pay Location: 000
Pay Period: 26-2024
Pay Date: 12/20/24
Inclusive Dates: 11/30/24 - 12/13/24

Net Pay: \$2,435.02

Paid Hours

Pay Period	Week	RSC	Level	Step	Des Act	Salary Rate	Code	Description	Hours	Amount
26-24	1	E	17		090	88,836	056	SICK LEAVE	40.00	1,708.38
26-24	2	E	17		090	88,836	035	EXTRA STRAIGHT TIME	9.89	422.40
26-24	2	E	17		090	88,836	052	WORK HOURS	40.00	1,708.38
26-24	2	E	17		090	88,836	054	NIGHT WORK PREM HOURS	11.39	38.92
26-24	2	E	17		090	88,836	072	SUNDAY PREMIUM	12.48	133.25
Total Hours Gross Pay:										4,011.33

Leave & Retirement Information**Category: 6.00****Annual Leave**

Leave Computation Date: 09/15/18

AL Prior Year Balance	152.00
AL Maximum Carryover	640.00
AL Carried over from Prior Year	152.00
+ AL Earned YTD	144.00
+ AL Holiday Earned YTD	.00
- AL Used YTD	48.00
= Earned Annual Leave Balance	248.00
+ AL Advanced YTD	16.00
= Available AL Balance	264.00
AL Used this Pay Period	.00

Category: 4.00**Sick Leave**

SL Prior Year Balance	140.00
+ SL Earned YTD	96.00
- SL Used YTD	104.00
= Current SL Balance	132.00
SL Used this Pay Period	40.00

Other Leave**Leave Without Pay (LWOP)**

Pay Period LWOP	.00
Calendar LWOP YTD	.00
Leave Increment LWOP	.00

YTD:	3,891.82	Total:	16,789.67
------	----------	--------	-----------

FERS USPS Thrift Contributions			
PP 1%:	34.17	YTD USPS 1%:	884.54
PP Match:	136.67	YTD Matching:	3,537.94

Insurance Income			
Pay Period:	4.35	YTD:	112.04

Earnings Statement Messages			
No messages			

Additional Pay & Other Compensation

Description	Amount	
	Pay Period	YTD
Total Additional Pay / Other Compensation:	.00	.00
Total Adjustments Gross:	.00	.00
Total Gross Pay:	\$4,011.33	\$114,128.09

Deductions

Description	Amount	
	Pay Period	YTD
Retirement: FERS - Ret-FICA Code E	150.34	3,891.82
Social Security	232.06	see YTD below
Medicare	54.27	see YTD below
Federal Tax: M 02	295.89	8,988.79
Health Plan Pre-tax: (Family) B32 Anthem Blue Cross Select HMO C	215.17	5,571.44
State Income Tax: CA S 00	202.75	6,304.32
FEDVIP Vision Pre Tax	10.65	276.84
FEDVIP Dental Pre Tax	42.49	1,104.68
Optional Insurance: C 5	4.15	107.90
Social Security (deducted on Ins Income)	.27	6,651.80
Medicare (deducted on Ins Income)	.06	1,555.66
TSP Loan: G	68.37	1,777.62
TSP Loan: G	24.41	634.66
Thrift Savings Plan (TSP): 5% - (Regular)	170.84	4,422.50
Thrift Savings Plan (TSP): \$ - (Roth)	30.00	750.00
Union Dues: S	15.00	390.00
Union Dues: L	35.45	921.70
Allotment	24.14	627.64
Total Current Pay Period Deductions:	1,576.31	
Total Adjustments Deductions:	.00	
Total Deductions:	\$1,576.31	\$43,977.37
Net Pay (Net To Bank):	\$2,435.02	\$70,150.72

Adjustments

No adjustments for this pay period

Employee Information

Employee: CIPRIANO C JASSO III
 Employee ID: 03566860
 Finance Number: 05-5790
 Pay Location: 000
 Pay Period: 01-2025
 Pay Date: 01/03/25
 Inclusive Dates: 12/14/24 - 12/27/24

Net Pay: \$3,119.77

Paid Hours

Pay Period	Week	RSC	Level	Step	Des Act	Salary Rate	Code	Description	Hours	Amount
01-25	1	E	17		090	88,836	035	EXTRA STRAIGHT TIME	17.42	744.00
01-25	1	E	17		090	88,836	052	WORK HOURS	40.00	1,708.38
01-25	1	E	17		090	88,836	054	NIGHT WORK PREM HOURS	7.85	26.82
01-25	1	E	17		090	88,836	072	SUNDAY PREMIUM	11.16	119.16
01-25	2	E	17		090	88,836	035	EXTRA STRAIGHT TIME	12.79	546.26
01-25	2	E	17		090	88,836	052	WORK HOURS	32.00	1,366.71
01-25	2	E	17		090	88,836	054	NIGHT WORK PREM HOURS	5.85	19.99
01-25	2	E	17		090	88,836	058	HOLIDAY LEAVE	8.00	341.68
01-25	2	E	17		090	88,836	072	SUNDAY PREMIUM	10.76	114.89
Total Hours Gross Pay:										4,987.89

Leave & Retirement Information

Category: 6.00

Annual Leave

Leave Computation Date: 09/15/18

AL Prior Year Balance	152.00
AL Maximum Carryover	640.00
AL Carried over from Prior Year	152.00
+ AL Earned YTD	154.00
+ AL Holiday Earned YTD	.00
- AL Used YTD	48.00
= Earned Annual Leave Balance	258.00
+ AL Advanced YTD	6.00
= Available AL Balance	264.00
AL Used this Pay Period	.00

Category: 4.00

Sick Leave

SL Prior Year Balance	140.00
+ SL Earned YTD	100.00
- SL Used YTD	104.00
= Current SL Balance	136.00
SL Used this Pay Period	.00

Other Leave

Pay Period LWOP	.00
Calendar LWOP YTD	.00
Leave Increment LWOP	.00

Retirement			
YTD:	150.34	Total:	20,681.49

FERS USPS Thrift Contributions			
PP 1%:	34.17	YTD USPS 1%:	34.17
PP Match:	136.67	YTD Matching:	136.67

Insurance Income			
Pay Period:	4.35	YTD:	4.35

Earnings Statement Messages	
REVIEW W4 IN POSTALEASE	

Additional Pay & Other Compensation

Description	Amount	
	Pay Period	YTD
Total Additional Pay / Other Compensation:	.00	.00
Total Adjustments Gross:	.00	.00
Total Gross Pay:	\$4,987.89	\$4,987.89

Deductions

Description	Amount	
	Pay Period	YTD
Retirement: FERS - Ret-FICA Code E	150.34	150.34
Social Security	292.61	see YTD below
Medicare	68.43	see YTD below
Federal Tax: M 02	413.08	413.08
Health Plan Pre-tax: (Family) B32 Anthem Blue Cross Select HMO C	215.17	215.17
State Income Tax: CA S 00	302.65	302.65
FEDVIP Vision Pre Tax	10.65	10.65
FEDVIP Dental Pre Tax	42.49	42.49
Optional Insurance: C 5	4.15	4.15
Social Security (deducted on Ins Income)	.27	292.88
Medicare (deducted on Ins Income)	.07	68.50
TSP Loan: G	68.37	68.37
TSP Loan: G	24.41	24.41
Thrift Savings Plan (TSP): 5% - (Regular)	170.84	170.84
Thrift Savings Plan (TSP): \$ - (Roth)	30.00	30.00
Union Dues: S	15.00	15.00
Union Dues: L	35.45	35.45
Total Current Pay Period Deductions:	1,868.12	
Total Adjustments Deductions:	.00	
Total Deductions:	\$1,868.12	\$1,868.12
Net Pay (Net To Bank):	\$3,119.77	\$3,119.77

	Pay Period	YTD
Allotment	24.14	24.14
Total Current Pay Period Deductions:	1,868.12	
Total Adjustments Deductions:	.00	
Total Deductions:	\$1,868.12	\$1,868.12
Net Pay (Net To Bank):	\$3,119.77	\$3,119.77

Adjustments

No adjustments for this pay period

USPS Employee Earnings Statement

Employee Information

Employee: CIPRIANO C JASSO III
 Employee ID: 03566860
 Finance Number: 05-5790
 Pay Location: 000
 Pay Period: 02-2025
 Pay Date: 01/17/25
 Inclusive Dates: 12/28/24 - 01/10/25

Net Pay: \$2,718.70

Paid Hours

Pay Period	Week	RSC	Level	Step	Des Act	Salary Rate	Code	Description	Hours	Amount
02-25	1	E	17		090	88,836	035	EXTRA STRAIGHT TIME	12.42	530.45
02-25	1	E	17		090	88,836	052	WORK HOURS	32.00	1,366.71
02-25	1	E	17		090	88,836	054	NIGHT WORK PREM HOURS	5.10	17.43
02-25	1	E	17		090	88,836	058	HOLIDAY LEAVE	8.00	341.68
02-25	1	E	17		090	88,836	072	SUNDAY PREMIUM	9.69	103.46
02-25	2	E	17		090	88,836	035	EXTRA STRAIGHT TIME	4.03	172.12
02-25	2	E	17		090	88,836	052	WORK HOURS	32.00	1,366.71
02-25	2	E	17		090	88,836	054	NIGHT WORK PREM HOURS	3.11	10.63
02-25	2	E	17		090	88,836	072	SUNDAY PREMIUM	10.42	111.26
02-25	2	E	17		090	88,836	079	HQ AUTH ADMIN LEAVE	8.00	341.68
Total Hours Gross Pay:										4,362.13

Leave & Retirement Information

Category: 6.00		Annual Leave
Leave Computation Date: 09/15/18		
AL Prior Year Balance		152.00
AL Maximum Carryover		640.00
AL Carried over from Prior Year		152.00
+ AL Earned YTD		160.00
+ AL Holiday Earned YTD		.00
- AL Used YTD		48.00
= Earned Annual Leave Balance		264.00
+ AL Advanced YTD		.00
= Available AL Balance		264.00
AL Used this Pay Period		.00

Category: 4.00		Sick Leave
SL Prior Year Balance		140.00
+ SL Earned YTD		104.00
- SL Used YTD		104.00
= Current SL Balance		140.00
SL Used this Pay Period		.00

Other Leave

Pay Period LWOP	.00
Calendar LWOP YTD	.00
Leave Increment LWOP	.00

Retirement			
YTD:	300.68	Total:	20,681.49

FERS USPS Thrift Contributions			
PP 1%:	34.17	YTD USPS 1%:	68.34
PP Match:	136.67	YTD Matching:	273.34

Insurance Income			
Pay Period:	4.35	YTD:	8.70

Earnings Statement Messages	
REVIEW W4 IN POSTALEASE	

Additional Pay & Other Compensation

Description	Amount	
	Pay Period	YTD
Total Additional Pay / Other Compensation:	.00	.00
Total Adjustments Gross:	.00	.00
Total Gross Pay:	\$4,362.13	\$9,350.02

Deductions

Description	Amount	
	Pay Period	YTD
Retirement: FERS - Ret-FICA Code E	150.34	300.68
Social Security	257.16	see YTD below
Medicare	60.14	see YTD below
Federal Tax: M 02	344.44	757.52
Health Plan Pre-tax: (Family) B32 Anthem Blue Cross Select HMO C	61.48	276.65
Health Plan Pre-tax: (Family) 35B BLUE CROSS AND BLUE SHIELD	99.90	99.90
State Income Tax: CA S 00	244.14	546.79
FEDVIP Vision Pre Tax	10.65	21.30
FEDVIP Dental Pre Tax	42.49	84.98
Optional Insurance: C 5	4.15	8.30
Social Security (deducted on Ins Income)	.27	550.31
Medicare (deducted on Ins Income)	.06	128.70
TSP Loan: G	68.37	136.74
TSP Loan: G	24.41	48.82
Thrift Savings Plan (TSP): 5% - (Regular)	170.84	341.68
Thrift Savings Plan (TSP): \$ - (Roth)	30.00	60.00
Union Dues: S	15.00	30.00
Total Current Pay Period Deductions:	1,643.43	
Total Adjustments Deductions:	.00	
Total Deductions:	\$1,643.43	\$3,511.55
Net Pay (Net To Bank):	\$2,718.70	\$5,838.47

	Pay Period	YTD
Union Dues: L	35.45	70.90
Allotment	24.14	48.28
Total Current Pay Period Deductions:	1,643.43	
Total Adjustments Deductions:	.00	
Total Deductions:	\$1,643.43	\$3,511.55
Net Pay (Net To Bank):	\$2,718.70	\$5,838.47

Adjustments

No adjustments for this pay period

Employee Information

Employee: CIPRIANO C JASSO III
 Employee ID: 03566860
 Finance Number: 05-5790
 Pay Location: 000
 Pay Period: 04-2025
 Pay Date: 02/14/25
 Inclusive Dates: 01/25/25 - 02/07/25

Net Pay: \$1,931.69

Paid Hours

Pay Period	Week	RSC	Level	Step	Des Act	Salary Rate	Code	Description	Hours	Amount
04-25	1	E	17		090	94,166	035	EXTRA STRAIGHT TIME	3.71	167.96
04-25	1	E	17		090	94,166	052	WORK HOURS	40.00	1,810.88
04-25	1	E	17		090	94,166	054	NIGHT WORK PREM HOURS	3.11	11.26
04-25	1	E	17		090	94,166	072	SUNDAY PREMIUM	9.10	102.99
04-25	2	E	17		090	94,166	035	EXTRA STRAIGHT TIME	4.36	197.39
04-25	2	E	17		090	94,166	052	WORK HOURS	32.00	1,448.71
04-25	2	E	17		090	94,166	054	NIGHT WORK PREM HOURS	3.66	13.26
04-25	2	E	17		090	94,166	056	SICK LEAVE	8.00	362.18
04-25	2	E	17		090	94,166	072	SUNDAY PREMIUM	11.29	127.78
Total Hours Gross Pay:										4,242.41

Leave & Retirement Information

Category: 6.00		Annual Leave
Leave Computation Date: 09/15/18		
AL Prior Year Balance		264.00
AL Maximum Carryover		640.00
AL Carried over from Prior Year		264.00
+ AL Earned YTD		12.00
+ AL Holiday Earned YTD		.00
- AL Used YTD		80.00
= Earned Annual Leave Balance		196.00
+ AL Advanced YTD		148.00
= Available AL Balance		344.00
AL Used this Pay Period		.00

Category: 4.00		Sick Leave
SL Prior Year Balance		140.00
+ SL Earned YTD		8.00
- SL Used YTD		8.00
= Current SL Balance		140.00
SL Used this Pay Period		8.00

Other Leave

Pay Period LWOP	.00
Calendar LWOP YTD	.00
Leave Increment LWOP	.00

Retirement			
YTD:	619.40	Total:	20,681.49

FERS USPS Thrift Contributions			
PP 1%:	36.22	YTD USPS 1%:	140.78
PP Match:	144.87	YTD Matching:	563.08

Insurance Income			
Pay Period:	4.99	YTD:	18.68

Earnings Statement Messages	
No messages	

Additional Pay & Other Compensation

Description	Amount	
	Pay Period	YTD
Total Additional Pay / Other Compensation:	.00	.00
Total Adjustments Gross:	.00	.00
Total Gross Pay:	\$4,242.41	\$21,996.97

Deductions

Description	Amount	
	Pay Period	YTD
Retirement: FERS - Ret-FICA Code E	159.36	619.40
Social Security	251.07	see YTD below
Medicare	58.72	see YTD below
Federal Tax: M 02	331.44	2,282.04
Health Plan Pre-tax: (Family) 35B BLUE CROSS AND BLUE SHIELD	139.92	379.74
State Income Tax: CA S 00	233.06	1,307.23
Garnishment	701.20	701.20
FEDVIP Vision Pre Tax	10.75	42.80
FEDVIP Dental Pre Tax	42.21	169.40
Optional Insurance: C 5	4.15	16.60
Social Security (deducted on Ins Income)	.31	1,311.12
Medicare (deducted on Ins Income)	.07	306.63
TSP Loan: G	68.37	273.48
TSP Loan: G	24.41	97.64
Thrift Savings Plan (TSP): 5% - (Regular)	181.09	703.86
Thrift Savings Plan (TSP): \$ - (Roth)	30.00	120.00
Union Dues: S	15.00	60.00
Total Current Pay Period Deductions:	2,310.72	
Total Adjustments Deductions:	.00	
Total Deductions:	\$2,310.72	\$8,906.15
Net Pay (Net To Bank):	\$1,931.69	\$13,090.82

	Pay Period	YTD
Union Dues: L	35.45	141.80
Allotment	24.14	96.56
Health Plan Pre-tax: (Family) B32 Anthem Blue Cross Select HMO C	.00	276.65
Total Current Pay Period Deductions:	2,310.72	
Total Adjustments Deductions:	.00	
Total Deductions:	\$2,310.72	\$8,906.15
Net Pay (Net To Bank):	\$1,931.69	\$13,090.82

Adjustments

No adjustments for this pay period